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Moving Past the “Role” World: The Post-Pandemic New Reality of Acute Psychiatric Care

SCOTT ZELLER, MD

Vice-President, Acute Psychiatry, Vituity

Assistant Clinical Professor, University of California, Riverside

Past President, American Association for Emergency Psychiatry

Past Chair, National Coalition on Psychiatric Emergencies


About Me



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Vice President of Acute Psychiatry, Vituity

The New Normal for Acute Psychiatry Post-Pandemic

- Greater recognition of the need for provider wellness.
 - Shift focus from defining our roles and ourselves by practice location.
 - Unprecedented use and acceptance of Telehealth.
 - Telehealth provides opportunities to expand access to care for psychiatric patients.
 - Innovative Emergency Psychiatry programs could greatly expand Emergency Department capacity.
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A Stressful Time took its toll...

- Hospital frontline workers across the USA experienced increased symptoms of burnout during the pandemic
- In one study, 74% of surveyed healthcare workers reported high amounts of **distress**,¹ and in another study, almost 50% of respondents reported moderate-to-severe symptoms of **burnout**².
- Because of fears of impacts on licenses and credentialing, many clinical personnel were reluctant to seek help.

1. Schacter et al, Gen Hosp Psychiatry 2020

2. Chor et al, Am J Emerg Med 2020

New Focus on Provider Wellness

- Calls to eliminate licensing, credentialing questions on having sought mental health assistance
 - Recognition by hospital leadership that clinical staff aren't immune to stressors
 - EAP encouragement, sponsored wellness opportunities
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Silver Lining

- One positive development for the care of emergency psychiatric patients during the pandemic was the acceleration of interest and demand for innovative approaches to treat this population in hospital Emergency Departments.

Acute Care, Acute Challenges

Acute Care Psychiatry's Toughest Challenges

- Psychiatrist Shortage
- Patient access
- Costs
- ED crowding
- Routing and holds of behavioral health patients in the ED
- Future unknowns preventing in-person treatment



Prevalence

12-15%

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- Between 12% - 15% of all emergency department visits nationwide are mental-health related
 - At least 7 to 8 million emergency psychiatric assessments are made each year in the USA

Telehealth regs relaxed during Covid

- New policies allowing wider use of telemedicine during the pandemic opened the door for far more EDs to commence with on-demand emergency telepsychiatry programs, improving access to psychiatric care while also reducing percentages of psychiatric hospitalizations and boarding times.^{1,2}
- “Not just for rural settings anymore!”

1. Chen et al. Gen Hosp Psychiatry 2020
2. Whiteside et al. Am J Emerg Med 2020

2020: The Year of Telehealth

A Seismic Shift to Telehealth Across Our Industry

**Virtual
Doctor
Visits**

**Urgent
Care
Consults**

**Mental
Health
Appointments**

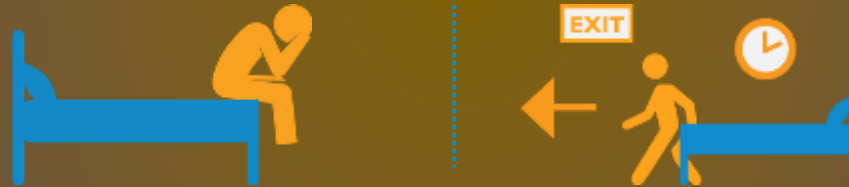
**Acute
Care**

Improving Care with Telepsych

DECREASE Up to 80% in mental health patients' ED boarding time



DECREASED admissions to Inpatient Units and LOS



IMPROVED Coordination between psychiatrists and consulting providers



The Next Wave of the Pandemic

- As the nation comes out of the pandemic and lockdowns, there are indications that the next wave of impact for hospitals may be one of dramatically increasing numbers of behavioral health emergency patients presenting to EDs, many of whom delayed seeking assistance previously due to infection concerns.^{1,2}

1. A. Joseph, *Stat News*, May 2021
2. R. Whelan, *Wall Street Journal*, June 2021

Making Positive Change



'Zeller's Six Goals' of Emergency Psychiatric Care



- Exclude medical etiologies of symptoms and ensure medical stability
- Rapidly stabilize the acute crisis
- Avoid coercion
- Treat in the least restrictive setting
- Form a therapeutic alliance
- Formulate an appropriate disposition and aftercare plan

EmPATH units

Emergency Psychiatric Assessment Treatment Healing

Research shows that 75% or more of severe psychiatric emergencies can be **stabilized within 24 hours**

What makes the EmPATH Approach Different?

- Designated destination for all medically-cleared patients in crisis prior to determination of disposition or IP admission; not viewed as an alternative destination but *THE* destination
- Designed and staffed to treat all emergency psychiatric patients – philosophy of “no exclusion”
- Immediate patient evaluation and treatment by a psychiatrist, constant observation and re-evaluation
- Provides a calming, healing, comfortable setting completely distinct from the Medical ED
- Wellness and Recovery-oriented approach

Physical Space Design

Calming, healing environment that prioritizes safety and freedom

Large, open 'milieu' space

where patients can be together in the same room – high ceilings and ambient light, soothing decor

Designed to facilitate

socialization, discussion, interaction and therapy

Per chair model

outfitted with fold-flat recliners

Space recommendation

80 sq. ft. total per patient, which includes 40 sq. ft. patient area around each recliner

Open nursing station w/instant access to staff

No 'bulletproof glass fishbowl' separate from the patients

Voluntary Calming Rooms

Avoids locked seclusion rooms or restraints

A Calming, Comfortable Environment



Patient Benefits

Trauma-informed Unit, a home-like care setting different from a chaotic ED; relaxation, movement, recreation encouraged

Calming Environment that best meets patients' needs, can serve themselves snacks, beverages, linens

Multi-disciplinary Treatment Team involved from arrival to disposition

Constant Observation & Re-evaluation leads to much higher diversion from hospitalization

Rapid Evaluation by Psychiatrists, ensuring care integration with comprehensive care plan development

Restraint Elimination
Typically far less than 1%



Hospital Benefits

EMTALA-Compliant

for both voluntary and involuntary mental health crises

ED Capacity Creation

Alleviate volume pressure in the ED and reduce psychiatric holds and boarding

Reimbursement Options

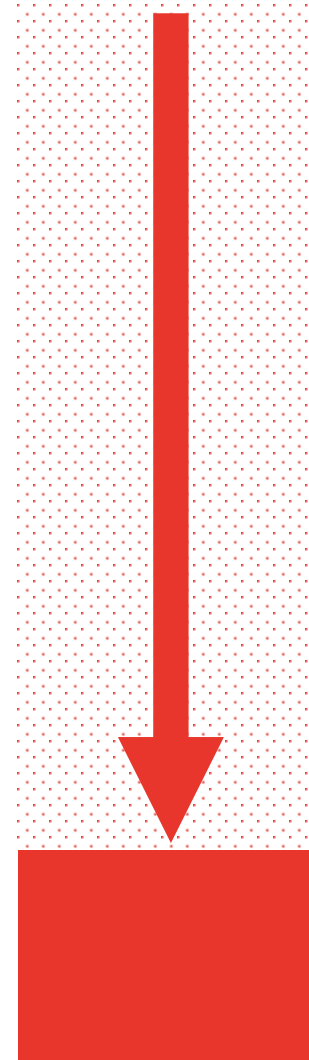
Among CMS and private payers

Eliminate Unnecessary Admissions

if you have a BHU and reduce payer denials

Cost-Effective Implementation

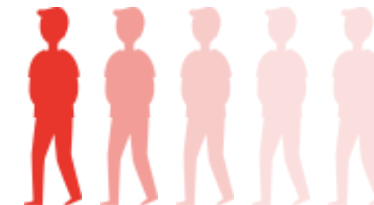
by remodeling available, unused hospital spaces



Up to

80%

**Reduction in
Admission Rates**





Thank you!

Please visit us online at www.vituity.com